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PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1400 \$300 SO \$1700 08/14/2007 EXAMINER ART UNIT CLASS-SUBCLASS AFTERGUT, JEFF H 1733 156-169000 Change of correspondence address or indication of "Fee Address" (37 CFR 1,363). 2. For printing on the patent front page, list Ingrassia Fisher & Lorenz, P.C (1) the names of up to 3 registered patent attorneys ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required. 3. 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